

13 APR 24 PM 3:25

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
 For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FRIENDS FOR SHURTLEFF INC.

ADDRESS (number and street)

190 WEST 800 NORTH STE 100

☐ Check if different than previously reported. (ACC)

PROVO

UT

84601

2. FEC IDENTIFICATION NUMBER ▼

C C00462614

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

UT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y
 01 / 01 / 2013

through

M M / D D / Y Y Y Y Y
 03 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JAMES GILBERT

Signature of Treasurer JAMES GILBERT

Date

M M / D D / Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
 (Revised 02/2003)